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SERIAL NUMBER 09/884,451	FILING OR 371(c) DATE 06/19/2001 RULE	CLASS 438	GROUP ART UNIT 2823	ATTORNEY DOCKET NO. 101361-0043
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APPLICANTS
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**** CONTINUING DATA *******
 This application is a CON of 09/339,633 06/24/1999 PAT 6,248,642 *yes 10/16/2005*

**** FOREIGN APPLICATIONS ******* *none 10/16/2005*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
**** 07/18/2001**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NH	SHEETS DRAWING 4	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Signature]</i> Initials			

ADDRESS
021125

TITLE
SIMOX USING CONTROLLED WATER VAPOR FOR OXYGEN IMPLANTS

FILING FEE RECEIVED 1192	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees
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